#### FORM D



## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

#### FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTIO

OMB APPROVAL

OMB Number:

Expires:

3235-0076 May 31, 2005

Estimated average burden

hours per form ...... 16.00

SEC USE ONLY	SEC	USE	ONLY
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Serial

DATE RECEIVED

Nama of Offering ( about if the	is is an amondment and name has al				• 4				
Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  Integrex, Inc. \$3,000,000 Convertible Promissory Note Purchase Agreement									
Filing Under (Check box(es) that apply):   Rule 504   Rule 505   Rule 506   Section 4(6)   ULOE									
Filing Under (Check box(es) that a	apply): $\square$ Rule 504 $\square$ Rule 505	Kule 506	☐ Section 4(6)	□ ULOE	10001 711				
					1096474				
Type of Filing:   New Filing	☐ Amendment				10 10 1 / 1				
		ENTIFICATIO	N DATA						
1. Enter the information requested	dabout the issuer								
Name of Issuer (  check if this	is an amendment and name has char	nged, and indica	ite change.)						
Integrex, Inc.			<b>J</b>						
Address of Executive Offices	(Number and §	Street, City, Stat	e, Zip Code)	Telephone Nun	nber (Including Area Code)				
22029 - 23rd Drive S.E., Bothell		•	•	(425) 483-8989					
Address of Principal Business Ope	erations (Number and S	Street, City, Stat	e, Zip Code)	Telephone Nun	nber (Including Area Code)				
(if different from Executive Office	es)	•	• •	•	,				
Same				Same					
Brief Description of Business									
Contract manufacturer				£					
Type of Business Organization				مرزير بأرار	S. LETTERAL S. SAMP				
· ·	I limited partnership, already forme	ed [	other (please sp	ecify):	W.C.				
□ business trust □	☐ limited partnership, to be formed		<b>G</b> 1	• // //	enne so a a				
				11/100	11 A O 6000 A				
		Month Y	Year	To the state of th					
Actual or Estimated Date of Incom	poration or Organization:	0 2 9	9	🗵 Actual 🔲 És	fimated				
·				, s					
Jurisdiction of Incorporation or Or	ganization: (Enter two-letter U.S. I	Postal Service al	obreviation for Sta	te:					
1	CN for Canada; FN			WA					

#### GENERAL INSTRUCTIONS

#### Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (7-00) 1 of 8

A. BASIC IDENTIFICATION DATA										
2. Enter the information requested for the following:										
•	•	C	d within the past five ve	ars:						
<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;</li> </ul>										
	,	of corporate issuers and	of comorate general an	d managing nartne	ers of nartnership issuers: and					
<ul> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and</li> <li>Each general and managing partner of partnership issuers.</li> </ul>										
Check Box(es) that Apply	☐ Promoter	⊠ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or					
		_ bononoidi o wiici	E Executive Officer	El Birector	Managing Partner					
Full Name (Last name first, Bannick, Greg	if individual)									
Business or Residence Addr 22029 – 23rd Drive S.E., B			Code)							
Check Box(es) that Apply	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner					
Full Name (Last name first, Benaroya Company, L.L.C										
Business or Residence Addr 1001 Fourth Avenue, Suite			Code)							
Check Box(es) that Apply	☐ Promoter	⊠ Beneficial Owner	☑ Executive Officer	⊠ Director	☐ General and/or Managing Partner					
Full Name (Last name first, Carleton, John T.	if individual)									
Business or Residence Addr 22029 – 23rd Drive S.E., B			Code)							
Check Box(es) that Apply	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	⊠ Director	☐ General and/or Managing Partner					
Full Name (Last name first, Cho, Casey	if individual)									
Business or Residence Addr 22029 – 23rd Drive S.E., Be			Code)							
Check Box(es) that Apply	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner					
Full Name (Last name first, Fluke Capital Managemen					<u> </u>					
Business or Residence Addr 11400 South East 6th Stree	`		Code)		4.5					
Check Box(es) that Apply	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner					
Full Name (Last name first, Fuhrman, Alan	if individual)									
Business or Residence Addr 22029 – 23rd Drive S.E., B	•		Code)							
Check Box(es) that Apply	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner					
Full Name (Last name first, Gillis, Harvey	if individual)									
Business or Residence Addr 22029 - 23rd Drive S.E., Be			Code)							

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.) 2 of 8

		A. BASIC IDEN	TIFICATION DATA							
2. Enter the information rec	quested for the fol	llowing:								
<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> </ul>										
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;										
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and										
<ul> <li>Each general and</li> </ul>	managing partner	of partnership issuers.								
Check Box(es) that Apply	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner					
Full Name (Last name first, Gitchel, Keith	if individual)									
Business or Residence Add 22029 – 23rd Drive S.E., B			Code)							
Check Box(es) that Apply	☐ Promoter	☐ Beneficial Owner	ĭ Executive Officer	☐ Director	☐ General and/or Managing Partner					
Full Name (Last name first, Johnson, Mark	if individual)									
Business or Residence Addr 22029 – 23rd Drive S.E., B	•	, , ,	Code)							
Check Box(es) that Apply	☐ Promoter	☑ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner					
Full Name (Last name first, Volberding, Ted	if individual)									
Business or Residence Adda 22029 – 23rd Drive S.E., B			Code)							
Check Box(es) that Apply	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner					
Full Name (Last name first, Weston, Dennis	if individual)									
Business or Residence Addr 22029 – 23rd Drive S.E., B	•		Code)							
Check Box(es) that Apply	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner					
Full Name (Last name first, Whitten, Richard	if individual)									
Business or Residence Addr 22029 – 23rd Drive S.E., B			Code)							
Check Box(es) that Apply	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner					
Full Name (Last name first,	if individual)									
Business or Residence Addi	ress (Number and	Street, City, State, Zip	Code)							
	·· ——									
	(Use blank s	= -	ditional copies of this sh 2a of 8	eet, as necessary.)						

					В. І	NFORM.	ATION A	BOUT C	FFERIN	G				
													Yes	No
1. H	las the iss	suer sold	, or does	the issuer	intend to	sell, to no	n-accredit	ed investo	ors in this	offering?.				$\boxtimes$
			Answe	er also in A	Appendix,	Column	2, if filing	under UL	.OE.					
2. V	Vhat is th	ne minim	um inves	tment that	t will be a	ccepted fr	om any in	idividual?					\$	N/A
													Yes	No
3. D	oes the c	ffering p	ermit joi	nt owners	hip of a si	ngle unit?							X	
0 1 0	or similar isted is and of the bro	remunei n associa ker or de	ration for ted perso caler. If r	solicitation n or agent nore than	on of purc of a brok	hasers in er or deal ersons to	connectio er register	n with sal	es of secu ne SEC an	rities in to d/or with	he offerin a state or	ely, any commission g. If a person to be states, list the name or dealer, you may		
Full Nan	ne (Last n	ame first	, if individ	lual)	· · · · · · · · · · · · · · · · · · ·	<u> </u>						· , · · · <del>· ·</del> · ,		
Business	or Resid	ence Add	ress (Nun	nber and S	treet, City.	, State, Zip	Code)							
Name of	Associate	ed Broke	r or Deale	r										
States in	Which Po	erson Lis	ted Has S	olicited or	Intends to	Solicit Pu	rchasers			<del></del>				
(Chec	k "All Sta	ates" or cl	heck indiv	idual State	es)			******************	************				□ A11	States
(AL)	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL]	[IL]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]		
Full Nan	ne (Last n	ame first	, if individ	lual)										
Business	or Reside	ence Add	ress (Nun	nber and S	treet, City,	, State, Zip	Code)							
Name of	Associate	ed Broker	or Deale	r										
States in	Which Po	erson List	ted Has So	olicited or	Intends to	Solicit Pu	rchasers							
(Chec	k "All Sta	ites" or cl	neck indiv	ridual State	-c)								<b>□</b> Δ11	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]			J
[IL]	[IL]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]		
			if individ											
D :	D 11	4.1.1	0.1	1 10	C'A	Chita 7'	C. 1.)							<del></del>
Business	or Reside	ence Add	ress (Nun	iber and S	treet, City,	State, Zip	Code)							
Name of	Associate	ed Broker	or Deale	r										
States in	Which Pe	erson List	ed Has So	olicited or	Intends to	Solicit Pu	rchasers	<del></del>						
(Chec	k "All Sta	ites" or cl	heck indiv	ridual State	es)				•••••			{	□ All	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL] [MT]	[IL] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE O	F PF	ROCEEDS		
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate ffering Price	Amo	ount Already Sold
	Duku		-	¢	
	Debt				
		ъ <u> </u>		<u>3</u>	
	☐ Common ☐ Preferred	æ	2 000 000	e	2 000 000
	Convertible Securities (including warrants)				
	Partnership Interests				
	Other (Specify))				
	Total	<u>\$</u>	3,000,000	\$	3,000,000
	Answer also in Appendix, Column 3, if filing under ULOE.				
	number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Number Investors	Do	Aggregate llar Amount Purchases
	Accredited Investors		2	<b>\$</b>	3,000,000
	Non-accredited Investors		N/A	<b>\$</b>	N/A
	Total (for filings under Rule 504 only)		N/A	<b>\$</b> _	N/A
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.				
	Type of offering		Type of Security	Do	llar Amount Sold
	Rule 505		N/A	\$	N/A
	Regulation A		N/A	\$	N/A
	Rule 504		N/A	\$	N/A
	Total		N/A	\$	N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an				
	estimate and check the box to the left of the estimate.				

X

 $\boxtimes$ 

10,000

0

10,000

Printing and Engraving Costs.... Legal Fees

Accounting Fees ..... Engineering Fees. Sales Commissions (specify finders' fees separately)

Total .....

Other Expenses (identify)

C. OFFERING PRICE, NUMB	ER OF INVESTORS, EXPENSE	S ANI	USE OF PROC	 Eei	os		<del></del>
b. Enter the difference between the aggregate offering p total expenses furnished in response to Part C – Que proceeds to the issuer."	stion 4.a. This difference is the "	adjuste	d gross			\$	2,990,000
5. Indicate below the amount of the adjusted gross proceed each of the purposes shown. If the amount for any purp the box to the left of the estimate. The total of the proceeds to the issuer set forth in response to Part C - Que	pose is not known, furnish an estime payments listed must equal the	ate and	i check				
			Payments to Officers, Directors & Affiliates				ments to Others
Salaries and fees		$\boxtimes$	\$	_0	X	\$	0
Purchase of real estate		X	\$	_0	X	\$	0
Purchase, rental or leasing and installation of machin	nery and equipment	X	\$	_0	X	\$	0
Construction or leasing of plant buildings and facilit	ies	$\boxtimes$	\$	0	$\boxtimes$	\$	0
Acquisition of other businesses (including the value offering that may be used in exchange for the assets pursuant to a merger)	or securities of another issuer	X	\$	_0	X	\$	0
Repayment of indebtedness		$\boxtimes$	\$	_0	X	\$	0
Working capital		X	\$	_0	X	\$	2,990,000
Other (specify):							
		X	\$	0	X	\$	0
Column Totals		区	\$		X	\$	2,990,000
Total Payments Listed (column totals added)			X	\$ <u>2</u>	<u>,990,0</u>	000	<u>-</u>
<u>:</u> :	D. FEDERAL SIGNATURE						
The issuer has duly caused this notice to be signed by the signature constitutes an undertaking by the issuer to furninformation furnished by the issuer to any non-accredited in	ish to the U.S. Securities and Excl	ange (	Commission, upon				
Issuer (Print or Type) Integrex, Inc.	Signature  AdM/AM/AM/	Ste	<del></del>	I	Date	1/25/	103
Name of Signer (Print or Type) Richard Whitten	Title of Signer (Print or Type) Chief Financial Officer and Vi	ce Pres	sident of Finance			7	

### **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)